Introduction to Session 1

Session 1 is called "The Impact of HIV and AIDS on Our Community." Key topics include HIV transmission, perinatal prevention, and HIV testing.

The agenda for Session 1 is found on the following page. The session lasts about two hours and there is a note in the guide that indicates the halfway point for the session. If participants are actively engaged in discussion, as we hope, it is likely that the session will last close to two and one-half hours. Please ask participants to schedule two and one-half hours for each session.

After the agenda, we list the materials, supplies, and equipment you need for Session 1. Note that the collage poster on who has HIV or AIDS needs to be prepared before the session begins. When you decide that the personalities on the poster work well for delivering the message that one can't tell if someone is infected just by looking at him or her, you can use the same poster in subsequent cycles of SEPA.

Make sure your DVD player is working and that your copy of "Mi Hermano" can be seen and heard.

We also provide the core elements and associated activities that apply to Session 1 to emphasize the importance of maintaining fidelity to core elements by not eliminating related discussions and activities.

Session 1: The Impact of HIV and AIDS on Our Community Agenda

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Welcome Participants (25 minutes)	15
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Who Has HIV or AIDS?	
How is HIV Transmitted?	
Perinatal Prevention and How HIV is not Transmitted	
Testing for HIV Infection	
Signs and Symptoms of HIV Infection	
The Importance of Preventing HIV	
Wrap-Up Activities (5 minutes)	5 6

Equipment, Supplies, and Materials for Session 1

Below is a checklist of materials you will need for Session 1.

☐ Facilitators Guide
☐ Participant Workbooks
☐ CD of Session 1 PowerPoint slides
☐ LCD projector
☐ Laptop computer
☐ Screen
☐ DVD player
□ TV
□ Podium
☐ Newsprint
☐ Easel stand
☐ Paper
☐ Markers
☐ Pens and pencils
☐ Nametags
☐ DVD: "Mi Hermano"
☐ Collage poster: Who Has HIV or AIDS?



CORE ELEMENT	ACTIVITIES
Core Element 1: Provide culturally and	Discussions
linguistically appropriate information to	 Facts about HIV and AIDS in the
sexually active women at risk of	Latino community
acquiring HIV from unprotected sex	How is HIV transmitted?
with male partners in interactive, small	Perinatal prevention
group sessions that focus on	Testing for HIV infection
HIV and STD transmission and	
prevention;	 The importance of preventing HIV
human sexuality and male and	111 V
female anatomy;	
• interpersonal communications;	Group Activity
and	Who Has HIV or AIDS?
relationship violence.	
Core Element 3: Build self-efficacy and	<u>Homework</u>
knowledge for safer sex behaviors,	A conversation about HIV and AIDS
improved communication with	
partners, and violence management	
through homework exercises and the	
sharing of personal experiences.	
Core Element 4: Show a culturally	DVD
appropriate video during the first	Watch and discuss "Mi Hermano"
session that portrays the effects of HIV	
and AIDS on members of the target	
population and discuss what is	
communicated about the impact of HIV	
and AIDS on the community, including	
impacts on families and women.	

SESSION 1: THE IMPACT OF HIV AND AIDS ON OUR COMMUNITY

WELCOME PARTICIPANTS



Purpose: To introduce yourself to participants and allow participants to introduce themselves to each other; to provide basic information on the intervention



Time: 25 minutes

As with any new program, it's important to create a welcoming environment for your participants. Use the first two minutes of Session 1 to introduce yourself and SEPA. Be enthusiastic and engaging. Then ask participants to introduce themselves to each other.

Hi, my name is _____ and I am your SEPA facilitator. I am so happy that you decided to be a part of SEPA, and I look forward to our time together.

SEPA takes place over six sessions. During this time, we will get to know each other, learn from each other, and also have some fun. We will discuss issues that affect us as women and that affect the Latino community. You will learn how to protect your health and how to improve relationships with husbands or boyfriends and members of your family. All of us can use help when it comes to relationships and communicating with important people in our lives. The issues we cover are so important and that's why I'm pleased to see you here today. In addition to relationships and ways to improve communication, we will discuss HIV and AIDS and other sexually transmitted diseases such as syphilis and genital herpes, and we will learn how to protect ourselves from getting infected. We will also discuss domestic violence and how it affects our families and the community. An important part of SEPA is sharing what you learn with members

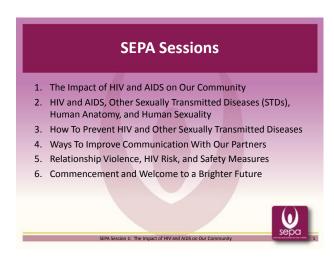
of your family and friends and neighbors so that we can work together to help build safer and healthier communities.

You should know that SEPA was created for sexually active women at risk of infections from sexually transmitted diseases due to unprotected sex.

Unprotected sex means having sex without the use of a male or female condom.

When a woman does not know for sure if a man is infected with HIV, the virus that causes AIDS, or any other sexually transmitted disease and she has unprotected sex with this man, she puts herself at risk of serious illness. We are here to find out how to reduce these risks and live healthier lives so our families and the Latino community can be healthier and stronger.





SEPA includes six sessions. They are:

- 1. The Impact of HIV and AIDS on Our Community
- 2. HIV and AIDS, Other Sexually Transmitted Diseases (STDs), Human Anatomy, and Human Sexuality
- 3. How To Prevent HIV and Other Sexually Transmitted Diseases
- 4. Ways To Improve Communication With Our Partners

- 5. Relationship Violence, HIV Risk, and Safety Measures
- 6. Commencement and Welcome to a Brighter Future

For the next six weeks we will work together to learn and share experiences that affect our lives and our community. To start, let's get to know each other. I will begin by introducing myself.



Facilitator's Note:

Spend some time preparing your introduction. Think about how you became interested in HIV prevention, how you became involved in SEPA, and what you have gained from working with Latinas. Your introduction should last approximately two minutes and should describe your experience with HIV prevention and health education. You may want to conduct an icebreaker after introductions. Resources about icebreakers include *The Big Book of Icebreakers: Quick, Fun Activities for Energizing Meetings and Workshops* by Edie West, and *Team-Building Activities for Every Group* by Alanna Jones. These resources may be available at your local bookstore. Searching the Internet for icebreakers is also easy to do. Just use a search engine, such as Google or Yahoo, and type in "icebreakers." There are many websites that can assist you.

Once you have introduced yourself, ask participants to introduce themselves. Ask that they wear nametags to help others remember their names.

Now I want to meet each of you and have you meet each other. Please introduce yourself. Say your name; describe your family (for example, who lives with you, how many children you have, if any, your country of origin); tell us why you decided to sign up for SEPA and what you hope to gain from this experience.

After introductions,

Thank you for introducing yourselves. We have a lot of information to discuss so it's very important that you come to all sessions. Each of the SEPA sessions builds on information discussed during the previous session. Missing a session is like missing an ingredient when you bake a cake: Without the flour or the sugar, the cake will not be very good! Those of you who attend at least three sessions will receive a certificate during our last session.

Expectations and Commitments



Group Activity



Purpose: To identify participants' expectations for SEPA and their level of commitment to the program



Needed Equipment, Supplies, and Materials: Participant Workbooks, pens and pencils

It's important for participants to identify what they expect to learn from SEPA. Reviewing expectations and helping participants understand what they will learn from SEPA can reinforce group cohesion. Once all participants know what to expect from SEPA, facilitators should ask them to commit to the program. Committing to the program means attending all the sessions, participating in discussions and activities, and completing homework assignments.

Hand out the Participant Workbooks, explain how they will be used, and ask participants to turn to "Session 1, Worksheet 1: Expectations and Commitments."

Think about what you expect to learn from SEPA. You talked about your expectations when you introduced yourself to the rest of the group. It's important that we define our expectations so that I can make sure that SEPA meets your needs. Please review this worksheet and write your expectations. After you have written your expectations, list your commitments to SEPA.

Examples of commitments include attending each session and participating in discussions. Finally, think about what you want to learn. List anything you want to learn in the space provided on the worksheet.

After participants have completed the worksheet, ask them to share their expectations and commitments.

Who would like to share their expectations and commitments or what they want to learn?

Confidentiality



Discussion



Purpose: To discuss confidentiality



Needed Equipment, Supplies, and Materials: Participant Workbooks, Slide 2

Confidentiality is an important concept to define for participants.

Confidentiality means that whatever is said in the group stays in the group. Give concrete examples of keeping information confidential and ask participants to pledge to maintain confidentiality. Stress to participants that by keeping each other's confidence, the group will remain a safe space where people can feel comfortable sharing information.

It's important that we maintain strict confidentiality in this group. Confidentiality means that whatever is said in this group stays in this group. Confidentiality means that no one will mention the name of any person in the group to anyone outside of the group. Confidentiality helps each of you feel safe about talking in the group because everyone agrees that what is said in the group is not told to anyone else.

To make sure all of us understand what it means to keep something confidential, let's review some examples. In which of the following situations is the group member keeping what she learned in the group confidential?

- A group member learns that another group member has an STD. She doesn't tell anyone at the agency where the group is taking place, but does tell her mom and sisters. No
- A group member is having lunch with some of her friends. She tells them how HIV is transmitted and how a person can learn if she has HIV. She even provides her friends with a list of places they could get tested. Yes
- Two group members are talking about another group member who mentioned during a session that her husband is abusive. The two group members are talking in the crowded waiting room of the agency. They are brainstorming ways to help their fellow participant. No

Ask participants to turn to "Session 1, Worksheet 2: Confidentiality Pledge" in their workbooks. Ask participants to sign the pledge.





Ask participants to read the pledge out loud.

Let's promise to keep each other's confidence and say: I promise that any personal issues that are discussed in these sessions will be held in strict confidence and will not be discussed with others outside our group.



Facilitator's Note:

Encourage all group members to read the pledge out loud.

Ground Rules



Group Activity



Purpose: To discuss ground rules

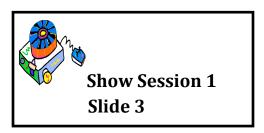


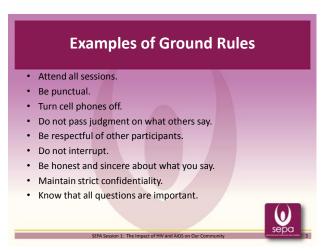
Needed Equipment, Supplies, and Materials: Slide 3, newsprint, easel, markers

All groups need ground rules. Developing ground rules for SEPA should be a collaborative process between the facilitator and participants. Begin by asking participants to brainstorm ground rules and write them on the newsprint. Display the newsprint with the ground rules on the wall during each session of the group.

We are all here to learn and to learn from each other. I do not have all the answers, but I do have information to share that I think will help protect you, your family, and your community. I am also excited to learn from each of you during our time together. Each one of you has experiences and opinions. I am hoping that everyone will share her story and opinions with the group so that we can learn from each other.

To make sure that we have a group environment that helps us learn, let's list some ground rules.





Here are some ground rules from other SEPA groups:

- Attend all sessions.
- Be punctual.
- Turn cell phones off.
- Do not pass judgment on what others say.
- Be respectful of other participants.
- Do not interrupt.
- Be honest and sincere about what you say.
- Maintain strict confidentiality.
- Know that all questions are important.

What rules should we have for our group?

Allow participants to brainstorm. If confidentiality is not included as a ground rule, say: *I want to include confidentiality as a rule.*

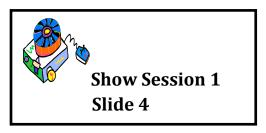
Write the ground rules on newsprint and post them on the wall each day of the training.

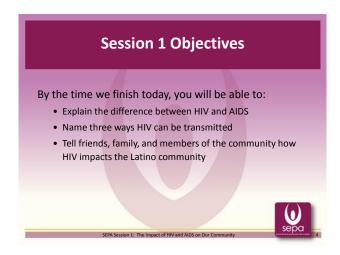
Additional talking points:

- Point out where the restrooms are and tell participants that if they need to leave the session, they should do so quietly.
- If your agency provides snacks for participants, inform them that snacks will be available during each session.
- If your agency provides transportation or childcare assistance, discuss how it works.

Session Objectives

Review session objectives with participants.





Each session of SEPA has objectives. Here are the objectives of Session 1.

By the time we finish today, you will be able to:

- Explain the difference between HIV and AIDS
- Name three ways HIV can be transmitted
- Tell friends, family, and members of the community how HIV impacts the Latino community

HIV'S IMPACT ON A LATINO FAMILY



DVD



Purpose: To introduce the topic of HIV and identify how HIV can impact the family and community



Needed Equipment, Supplies, and Materials: TV, DVD player, "Mi Hermano" DVD, Screen, Participant Workbooks



Time: 45 minutes

Introducing the topic of HIV and its impact on the Latino community is not always easy. The following video will help start a conversation about HIV, Latinos, and family.



Facilitator's Note:

Make sure your equipment works and that the DVD is intact.

Let's watch a video on how HIV has affected one Latino family. After we watch the DVD, you will have a few minutes to think about what you've seen and note how you feel. Please refer to "Session 1, Worksheet 3: Mi Hermano." Then we will discuss how HIV can impact our own families and the community as a whole.

Questions to prompt discussion:

- Overall, how do you feel after watching "Mi Hermano?"
- As a Latino, do you see certain cultural issues at play in "Mi Hermano?"
- What about issues relating to gender, or male and female roles?
- Do we know how Marta's husband got infected? Does knowing make a difference?
- What does "Mi Hermano" point out about HIV prevention?
- What HIV prevention messages does "Mi Hermano" provide specifically for women?

Possible responses:

- The video showed how important family is in Latino communities.
- The video portrayed machismo, especially in the father; he wanted to take charge of everything.
- "Mi Hermano" points out that you can love a man and even marry him and not know about his past, including whether he has HIV.
- The video shows that you have to know your partner, even your husband, and talk about things like HIV even though it can be uncomfortable.
- HIV/AIDS can affect so many people: the husband, the wife, the baby, the whole family.

After participants have had the opportunity to discuss "Mi Hermano," inform the group about the following:

I want to provide some information now about perinatal transmission, which is an important issue in "Mi Hermano." Perinatal transmission means that HIV can be passed from mother to child during pregnancy. According to the Centers for Disease Control and Prevention (CDC — the public health department of the government), 91 percent of children living with AIDS in the United States were infected during their mother's pregnancy. But having HIV and being pregnant don't necessarily mean your baby will be born with HIV. If a mother is HIV positive, her doctor can give her medications that will reduce the chance of her baby getting infected to two percent or less. Without medication, the chance of the baby getting infected is 25 percent. This means that one in four babies born to HIV-infected mothers who do not take medication could get infected, but only about one in 50 babies born to infected mothers who receive medication will become infected. Early detection of HIV infection and treating pregnant mothers with medication can prevent the transmission of HIV to babies. We will talk more about perinatal transmission later.



Facilitator's Note:

At this point, you should be halfway through implementation of Session 1.

Right now we are about halfway through Session 1. Are there any questions?

Would anyone like to share what you think or feel about what we are learning so far?

FACTS ABOUT HIV AND AIDS IN THE LATINO COMMUNITY



Discussion



Purpose: To provide the facts about HIV and the Latino community



Needed Equipment, Supplies, and Materials: Slides 5-8



Time: 10 minutes

Many women are not aware of the effects that HIV has on the Latino community. During this discussion, provide facts about Latinos and HIV.



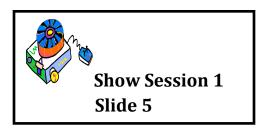
Facilitator's Note:

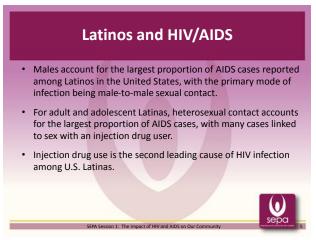
Check that you use the most recent surveillance data from the CDC: http://www.cdc.gov/hiv/topics/surveillance/basic.htm. You may also include data from your state health department.

Let's spend some time talking about HIV and AIDS in the Latino community here in the United States. "Mi Hermano" shows how HIV and AIDS affect one particular family. We must always remember that HIV and AIDS cause hardship on individuals and the people close to them. HIV and AIDS also affect Latinos as a community. Let's talk about the data that show how HIV and AIDS affect Latinos. These data come from the Centers for Disease Control and Prevention.

Feel free to ask questions as we review these slides.

Encourage participants to volunteer to read each slide and discuss the information. Sometimes statistics can be hard to understand. Make sure that participants understand the facts cited on each slide.

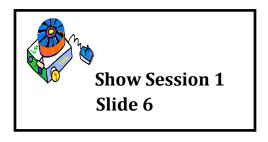


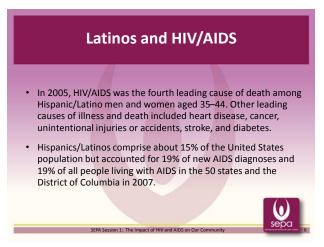


Males account for the largest proportion of AIDS cases reported among Latinos in the United States, with the primary mode of infection being male-to-male sexual contact.

For adult and adolescent Latinas, heterosexual contact accounts for the largest proportion of AIDS cases, with many cases linked to sex with an injection drug user.

Injection drug use is the second leading cause of HIV infection among U.S. Latinas.

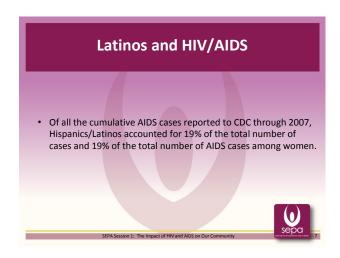




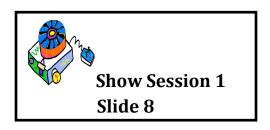
In 2005, HIV/AIDS was the fourth leading cause of death among Hispanic/Latino men and women aged 35–44. Other leading causes of illness and death included heart disease, cancer, unintentional injuries or accidents, stroke, and diabetes.

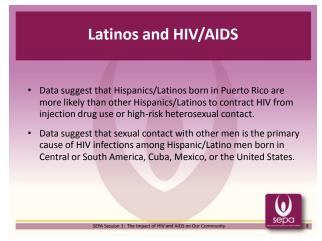
Hispanics/Latinos comprise about 15 percent of the United States population but accounted for 19 percent of new AIDS diagnoses and 19 percent of all people living with AIDS in the 50 states and the District of Columbia in 2007.





Of all the cumulative AIDS cases reported to CDC through 2007, Hispanics/Latinos accounted for 19 percent of the total number of cases and 19 percent of the total number of AIDS cases among women.





Data suggest that Hispanics/Latinos born in Puerto Rico are more likely than other Hispanics/Latinos to contract HIV from injection drug use or high-risk heterosexual contact.

Data suggest that sexual contact with other men is the primary cause of HIV infections among Hispanic/Latino men born in Central or South America, Cuba, Mexico, or the United States.

Questions to prompt discussion:

- Why do you think the risk for HIV and AIDS is so high among Latinos?
- Do you know anyone who has HIV? Please don't say the person's name because of confidentiality.

Possible responses:

- Latino men don't like to wear condoms.
- Latinas are afraid to ask their men to wear condoms.
- Drugs and alcohol make men and women lose control and they don't think about the consequences.
- Cultural issues like machismo affect sexual behavior; men want to dominate and have their way and that means not having safe sex.

ESSENTIAL INFORMATION ON HIV AND AIDS



Purpose: To define HIV and AIDS



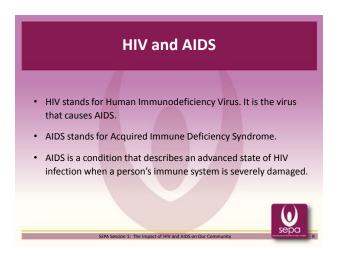
Needed Equipment, Supplies, and Materials: Slides 9-22



Time: 35 minutes

What Is the Difference Between HIV and AIDS?





Many people are confused about the difference between HIV and AIDS, so let's make sure we understand what HIV is and what AIDS is. HIV stands for Human Immunodeficiency Virus. It is the virus that causes AIDS. AIDS stands for Acquired Immune Deficiency Syndrome. AIDS is a condition that describes an advanced state of HIV infection when a person's immune system is severely damaged.

Everyone has an immune system. The immune system's role is to protect the body from infections. Infections are caused by viruses, bacteria, and parasites. When a person has an infection, the immune system, which is made up of cells, tissues, and organs, attacks and destroys the infection. Some viruses damage the immune system and make it hard for people to stay healthy. HIV is an example of a virus that damages the immune system.

A person has AIDS when the immune system is badly damaged by HIV. When this happens, the person can catch infections that a healthy person could otherwise fight. People with AIDS often die from these infections. However, with the right medication, people with HIV or AIDS can look healthy and live active lives for many years.

Who Has HIV or AIDS?



Group Activity



Purpose: To reinforce the message that you can't tell if someone has HIV just by looking at him or her



Needed Equipment, Supplies, and Materials: Collage poster, Participant Workbooks, Slide 10

The following exercise requires preparation prior to the session.

- 1. Use magazines, web sites, newspapers, or other resources to find 10 pictures of celebrities who have HIV/AIDS or have died of AIDS. Try to find pictures of celebrities who are not easily recognizable and are healthy looking. This way your participants will not readily know who the individuals are and if they have HIV or have died from AIDS.
- 2. Find 10 pictures of celebrities who do not have HIV or AIDS.
- 3. Once you have collected the pictures, create a collage on posterboard for the activity "Who Has HIV or AIDS?"
- 4. Put a number (1–20) on each picture so that participants can link a picture with its number on the page in the workbook titled "Who Has HIV or AIDS?"

The objective of this collage is to illustrate that no one can tell if a person is living with HIV or AIDS just by looking at him or her. This is an important idea to present because many people believe that you can tell if a person has HIV just by how the person looks. If a woman believes that she can tell whether a man is living with HIV, she could put herself at risk of infection by having unprotected sex.



Facilitator's Note:

Celebrities who have died from AIDS include: Perry Ellis, Arthur Ashe, Elizabeth Glaser, Ryan White, Frankie Ruiz, Robert Reed, and Anthony Perkins. Enter these names into an Internet search and you should be able to find pictures of each of them for your collage.

Celebrities who died years ago, such as Ryan White and Tony Perkins, are probably not recognizable to most SEPA participants. Do your best to include Latino men and women in your collage.

Hang up the collage. Refer participants to "Session 1, Worksheet 4: Who Has HIV or AIDS?" in their workbook.

Many women believe that they can tell whether or not a person is infected with HIV. If a woman thinks that she can tell if a potential partner has HIV just by looking at him, she may be less likely to protect herself from the virus by insisting that he use a condom. Look at the pictures on this collage and use the worksheet in your workbooks to note who on the collage has been infected by HIV and who has not. I will only give you a few minutes to decide. The goal of this activity is to determine whether the person has HIV or AIDS by looking at him or at her.

After participants have completed the worksheet, write the numbers 1–20 on the newsprint. Take a vote for each picture by asking participants to close their eyes so they are not influenced by the other women. Write the tally next to the number of each picture. After voting has been completed, review the correct answers.

How many people think the person in picture #[x] has HIV or has died of AIDS?

Questions to prompt discussion:

- How did you make your decision about who had HIV or AIDS?
- Was it an easy decision to make?
- If you can't look at someone and tell if the person has HIV, how do you know?

Possible responses:

- People who have AIDS look sick and are usually very skinny.
- I knew some of the celebrities already and knew from the news whether they were infected.
- You can't go by these pictures because the pictures are of the celebrities when they were healthy.

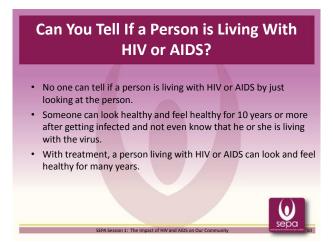


Facilitator's Note:

Don't forget to make your collage prior to Session 1. Search the Internet and magazines for pictures of celebrities. Remember: You want to pick 10 celebrities who are or who were infected with HIV, and 10 celebrities who are not infected. Make sure that the pictures of celebrities infected with HIV are mixed with the celebrities who are not infected. Try to find celebrities who are healthy looking and your participants will not recognize easily, and thus not know their HIV status. Remember the goal of this activity is to convince participants that you can't determine if a person has HIV just by looking at him or her. Each picture should be clearly marked with a number. Below is a list of celebrities that you can use for the collage. However, you are encouraged to create a collage that is culturally appropriate for the participants in your SEPA sessions.

Persons Infected	Persons Not
With HIV	Infected With HIV
Anthony Perkins	George Lopez
Ryan White	John Leguizamo
Nestor Almendros	Charo
Max Robinson	Tiger Woods
Pedro Zamora	Selena Gomez
Amanda Blake	Marc Anthony
Hector Lavoe	Salma Hayek
Frankie Ruiz	Rick Gonzalez
Elizabeth Glaser	Michael Jackson
Rudy Galindo	Jennifer Lopez





No one can tell if a person is living with HIV or AIDS by just looking at the person. Someone can look healthy and feel healthy for 10 years or more after getting infected and not even know that he or she is living with the virus. With treatment, a person living with HIV or AIDS can look and feel healthy for many years.

Do you have any questions?

How is HIV Transmitted?



Discussion



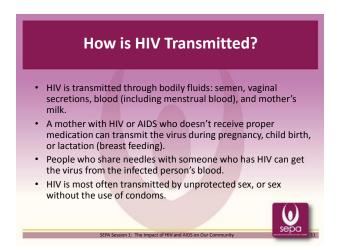
Purpose: To discuss how HIV is transmitted



Needed Equipment, Supplies, and Materials: Slides 11–13

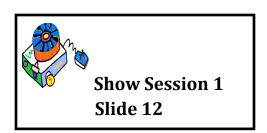
Many Latinas do not know how HIV is transmitted. This discussion will review the ways in which HIV is transmitted and emphasize that unprotected sex is the most common way for Latinas to contract the virus.

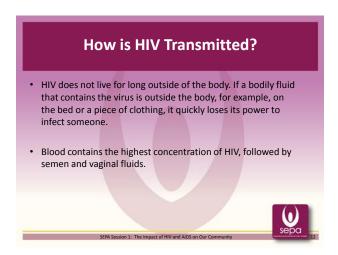




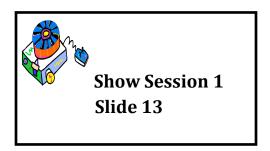
If we don't know how people get infected with HIV, how can we prevent it?

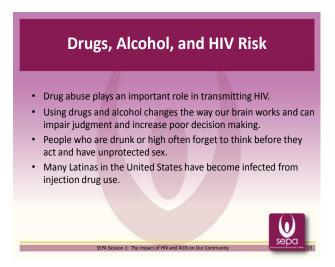
- HIV is transmitted through bodily fluids. The bodily fluids that transmit HIV are semen, vaginal secretions, blood (including menstrual blood), and breast milk.
- A mother with HIV or AIDS who doesn't receive proper medication can transmit the virus during pregnancy, child birth, or lactation (breast feeding).
- People who share needles with someone who has HIV can get the virus from the infected person's blood.
- HIV is most often transmitted by unprotected sex, or sex without the use of condoms.





- HIV generally does not live for long outside of the body. If a bodily fluid that contains the virus is outside the body, for example, on the bed or a piece of clothing, it quickly loses its power to infect someone. We need to point out that HIV can survive for several days in the small amount of blood that remains in a needle used to inject drugs or used for tattoos and body piercing. That's why you should never share injection drug equipment and why you should only see body artists who use sterile needles.
- Blood contains the highest concentration of HIV, followed by semen and vaginal fluids.





Drug abuse plays an important role in transmitting HIV. Using drugs and alcohol changes the way our brain works and can impair judgment and increase poor decision making. This means that people who are drunk or high often forget to think before they act and they have unprotected sex.

As we noted, many Latinas in the United States have become infected from injection drug use. As we talked about before, if someone shares needles with a person who has HIV, and that person's blood enters the other person's bloodstream, infection is possible. In blood, the virus is very strong and a small amount of blood can cause infection.

Are there any questions or comments about HIV transmission?

Perinatal Prevention and How HIV is not Transmitted



Discussion



Purpose: To discuss perinatal transmission and prevention



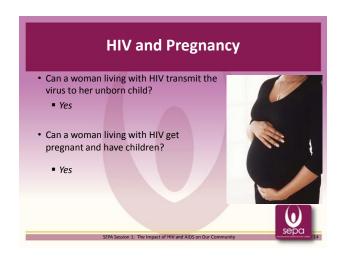
Needed Equipment, Supplies, and Materials: Slides 14–16

An important topic for many Latinas is HIV, pregnancy, and childbirth. The goal of the next discussion is to inform participants about perinatal transmission and prevention.

Now we're going to talk about a subject that is especially important to women: HIV, pregnancy, and childbirth. Remember how upset the family was in "Mi Hermano" because Marta had HIV and was pregnant?

Use Slides 14 and 15 to discuss HIV/AIDS and pregnancy and childbirth. Ask the group to shout out the answer after each item on the slide is read.





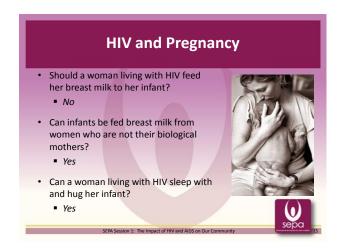
Can a woman living with HIV transmit the virus to her unborn child?

Answer: Yes. A woman can transmit the virus to her unborn child during pregnancy, labor, or delivery.

Can a woman living with HIV get pregnant and have children?

Answer: Yes. Women with HIV can have healthy children. Women should be tested before getting pregnant. Early treatment will decrease the chance of transmitting the virus to the unborn child. Medication called antiretroviral therapy, which is given to the mother during pregnancy, labor, and delivery, and then to the newborn, as well as elective cesarean section for women with high viral loads, can reduce perinatal HIV transmission.





Should a woman living with HIV feed her breast milk to her infant?

Answer: No. A woman living with HIV should not feed her infant her breast milk because it can transmit the virus.

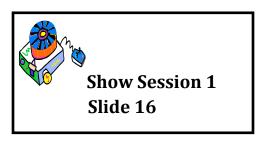
Can infants be fed breast milk from women who are not their biological mothers?

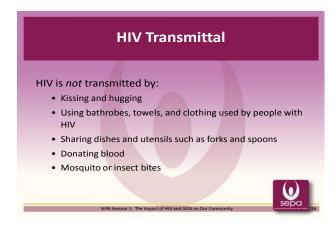
Answer: Yes. Infants can be fed breast milk from a breast milk bank, but only if the breast milk is tested for HIV. A breast milk bank stores human breast milk from donors and can be used by mothers who are unable to breast feed.

Can a woman living with HIV sleep with and hug her infant?

Answer: Yes. A woman living with HIV can and should cradle and maintain a normal, affectionate relationship with her infant.

Now it's time to talk about ways that HIV cannot be transmitted.





HIV is not *transmitted by:*

- Kissing and hugging
- Using bathrobes, towels, and clothing used by people with HIV
- Sharing dishes and utensils such as forks and spoons
- Donating blood
- Mosquito or insect bites

HIV affects all of us. People are infected with HIV at all social class levels, educational levels, and races throughout the world. The risk is not determined by who you are, but by what you do. Please note that a woman is significantly more likely than a man to get infected with HIV during vaginal intercourse.

Testing for HIV Infection



Discussion



Purpose: To discuss testing for HIV infection

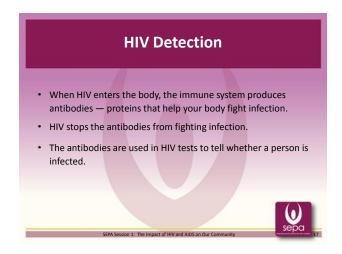


Needed Equipment, Supplies, and Materials: Slides 17–20

The following discussion reviews how HIV can be detected in the body.

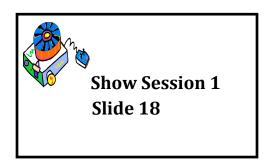
Let's talk about how HIV can be detected in your body.

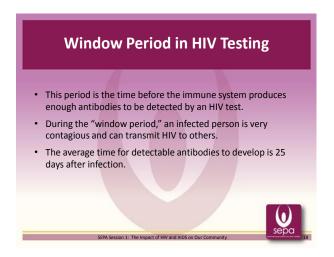




When HIV enters the body, the immune system produces antibodies. Antibodies are proteins that help your body fight infection.

HIV stops the antibodies from working. With HIV, a person cannot fight off infection. Even though the antibodies do not work, they are still present in the bloodstream. The antibodies are used in HIV tests to tell whether a person is infected.





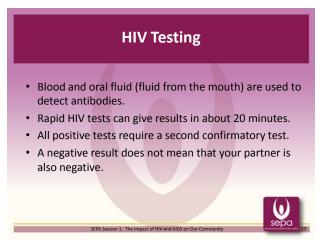
It takes time for the immune system to produce enough antibodies for an HIV test to detect. This time period is called the "window period," and it can vary from person to person.

Most people develop detectable antibodies within two to eight weeks after infection. Almost everyone will have detectable antibodies in the first three months after being infected.

During the "window period," an infected person will not know his status, is very contagious, and can transmit HIV to others.

The average time for detectable antibodies to develop is 25 days after infection.





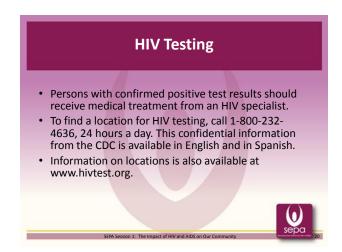
Most HIV tests use blood to detect infection. Rapid HIV tests use blood or oral fluid and can give results in about 20 minutes.

The HIV antibody test is the most commonly used test, but other recently developed tests can also detect HIV. These tests and tests that may be available in the future can identify HIV sooner after infection. In other words, these tests reduce the amount of time in the window period.

All positive tests must be followed up by another test to confirm the positive result. These tests could take a few days or a few weeks.

If you have a negative test result, it does not mean that your partner is also negative.





If you test positive for HIV, the sooner you get medical treatment, the better. Early medical treatment from an HIV specialist and a healthy lifestyle can help you stay well.

To find a location for HIV testing, call 1-800-232-4636, 24 hours a day. This information from the CDC is available in English and in Spanish. You can also find locations at www.hivtest.org.

There is one product for home testing that has been approved by the government's Food and Drug Administration (FDA). The kit is marketed as either "The Home Access HIV-1 Test System" or "The Home Access Express HIV-1 Test System." It requires users to collect a blood specimen and mail it to a laboratory for professional testing. No test kits allow consumers to interpret the results at home. The FDA-approved home tests are more than 99 percent accurate beyond six months after possible exposure to the virus.

Question to prompt discussion:

• You do not have to answer this question if you don't feel comfortable doing so, but has anyone had an HIV test or does anyone know someone who has? Would you like to describe what happened?



Facilitator's Note:

If you have had an HIV test and feel comfortable talking about it, please do so.

Signs and Symptoms of HIV Infection



Discussion



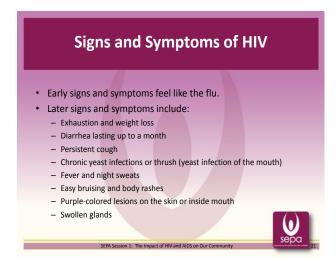
Purpose: To review the signs and symptoms of HIV infection



Needed Equipment, Supplies, and Materials: Slides 21–22

The following section reviews the signs and symptoms of HIV infection.



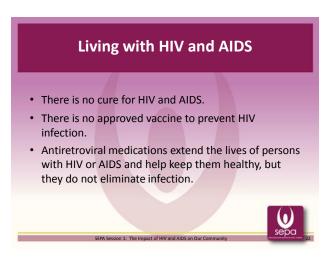


What are the signs and symptoms of being infected with HIV?

The earliest symptoms of HIV infection occur when the body begins to form antibodies. Early symptoms feel like the flu and include fever, rash, muscle aches, and swollen lymph nodes and glands. Many people do not have these early symptoms or they think they have the flu.

Over time, different symptoms develop. These include exhaustion, weight loss, diarrhea lasting up to a month, persistent cough, chronic yeast infections or thrush (yeast infection of the mouth), fever and night sweats, easy bruising, body rashes, purple colored lesions on the skin or inside mouth, and swollen glands.





There is no cure for HIV and AIDS, and there is no vaccine to prevent HIV infection. There are over a million persons living with HIV in the United States. Those who take their antiretroviral medication every day can look healthy, have jobs, and feel good for many years, but they will always be infected with HIV.

The Importance of Preventing HIV



Discussion



Purpose: To discuss the importance of preventing HIV

HIV infection affects everyone in the Latino community. The disease not only impacts those who are infected, it also affects the person's family and friends, the community, and the health care system. The following discussion allows women to brainstorm how HIV impacts their communities.

Question to prompt discussion:

• How does HIV infection impact our community?

Possible responses:

- People get sick and can't work.
- People die.
- Children may lose their moms or dads.
- When there's HIV in the community, there's a greater chance of getting infected.
- Some people don't have health insurance and can't get treatment.

HIV infection affects everyone in our community. The disease not only impacts those who are infected, it also affects the person's family and friends, the community, and the health care system.

The Latino community is affected by morbidity and mortality from HIV and AIDS, two terms for sickness and death. Sickness and death bring suffering to people and prevent communities from doing well financially, culturally, and artistically.

As if this isn't enough, children are orphaned because of HIV or left without family members to care for and nurture them. If children do not grow up to be healthy and educated, the Latino community and the nation as a whole suffer. HIV has a huge impact on our community and, as we have discussed, that impact is not good. Prevention is the best way to reduce this negative impact and to protect yourself and your community from HIV.

Remember, earlier I said that people are not at risk of getting HIV because of who they are, but because of what they do. We can all prevent HIV and protect ourselves by the decisions we make and the actions we take.

We will spend more time on HIV prevention – that is how to protect yourself from HIV – as well as the prevention of other sexually transmitted diseases during our next session. We will also discuss sexuality and male and female reproductive anatomy — three very important and interesting topics. I'm sure you will enjoy Session 2, and I hope all of you are able to attend and participate.

WRAP-UP ACTIVITIES

Wrap-up activities include key messages, homework assignments, and session evaluations. These are standard activities for each session.



Discussion



Purpose: To review key messages and homework assignment; to distribute evaluation sheets



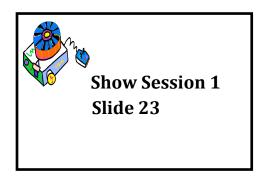
Needed Equipment, Supplies, and Materials: Slides 23-27, Participant Workbooks, evaluation sheets

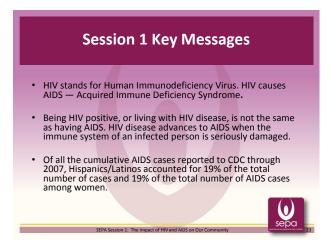


Time: 5 minutes

Before we end, I want to review key messages from today's session. Turn to "Session 1, Worksheet 5: Session 1 Key Messages" in your workbook. Please share these key messages with people you know.

Show Slides 23–27 as key messages are reviewed.



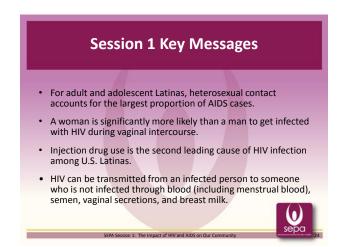


HIV stands for Human Immunodeficiency Virus. HIV causes AIDS, which is Acquired Immune Deficiency Syndrome.

Being HIV positive, or living with HIV disease, is not the same as having AIDS. HIV disease advances to AIDS when the immune system of an infected person is seriously damaged.

Of all the cumulative AIDS cases reported to CDC through 2007, Hispanics/Latinos accounted for 19 percent of the total number of cases and 19 percent of the total number of AIDS cases among women.





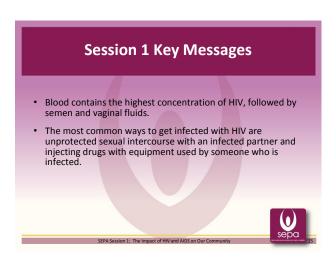
For adult and adolescent Latinas, heterosexual contact accounts for the largest proportion of AIDS cases.

A woman is significantly more likely than a man to get infected with HIV during vaginal intercourse.

Injection drug use is the second leading cause of HIV infection among U.S. Latinas.

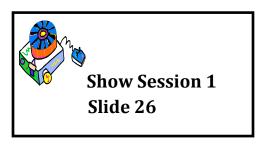
HIV can be transmitted from an infected person to someone who is not infected through blood (including menstrual blood), semen, vaginal secretions, and breast milk.

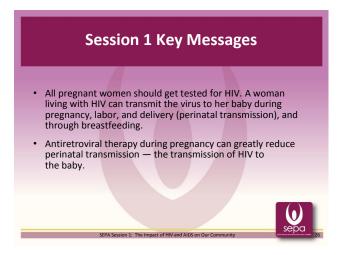




Blood contains the highest concentration of HIV, followed by semen and vaginal fluids.

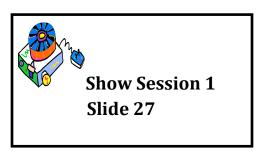
The most common ways to get infected with HIV are unprotected sexual intercourse with an infected partner and injecting drugs with equipment used by someone who is infected.

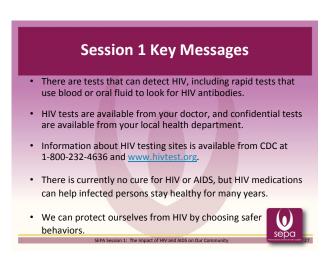




All pregnant women should get tested for HIV. A woman living with HIV can transmit the virus to her baby during pregnancy, labor, and delivery (perinatal transmission), and through breastfeeding.

Antiretroviral therapy during pregnancy can greatly reduce perinatal transmission — the transmission of HIV to the baby.





There are tests that can detect HIV infection, including rapid tests that use blood or oral fluid to look for HIV antibodies.

HIV tests are available from your doctor, and confidential tests are available from your local health department.

Information about HIV testing locations is available from the CDC at 1-800-232-4636 and at www.hivtest.org.

There is currently no cure for HIV or AIDS, but HIV medications can help infected persons stay healthy for many years.

We are at risk of getting HIV because of what we do. We can protect ourselves from HIV by choosing safer behaviors.

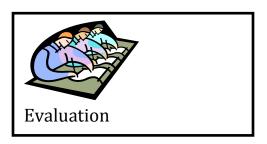


Homework

Let's turn to "Session 1, Worksheet 6: Home work – A Conversation about HIV and AIDS." This is your first homework assignment.

To practice what we have learned and educate members of our community, homework is assigned after each session. Don't be frightened and don't worry about having homework. Do your best to complete the assignments. You will see that they can be fun as well as beneficial to you and the community.

Your first assignment is to talk to someone about what he or she knows about HIV and AIDS. This person could be your husband or partner, or a friend or neighbor. Before you end the conversation, try to share an important point from today's session. We'll discuss how things went during our next session.



Refer participants to "Session 1, Worksheet 7: Session 1 Evaluation" in their workbooks. Ask them to complete the evaluation worksheet.

Before you leave, please take a minute to complete these evaluation sheets. We want to find out what you liked, what didn't work well for you, and what other topics are of interest. When you are finished, tear the sheets out of your workbook and place them on the table. I will use your feedback to make SEPA a better experience for you.

Thank you and I look forward to seeing you at our next session, which is [date/day/time]. We will spend more time on HIV prevention and will also discuss STDs, sexuality, and human reproductive anatomy. It will be a great session.